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SERIAL NUMBER 10/608,077	FILING OR 371(c) DATE 06/30/2003 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 9516-034-999
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/426,016 11/14/2002

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

09/25/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 0	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials				

ADDRESS

20582

TITLE

Pharmaceutical compositions and dosage forms of thalidomide

FILING FEE RECEIVED 1442	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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